

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

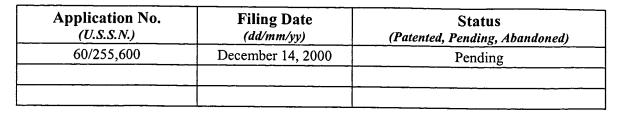
My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor of the subject matter which is claimed and for which a utility patent is sought on the invention entitled:

COMPOSITIONS AND METHODS FOR TREATING AN ARTHRITIC CONDITION

	Number	(if PCT, so indicate)	(dd/mm/yy)	Yes	No		
	Appln.	1	Filing Date	Priority	Priority Claimed		
I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of an PCT International application designating at least one country other than the United States listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.							
		uty to disclose information which lance with Title 37, Code of Fed			this		
		nave reviewed and understand the ing the claims, as amended by a					
\boxtimes	is attached he	ereto.					
the sp	ecification of v	which:					

\boxtimes	I hereby claim the benefit under Title 35, United States Code, § 119(e) or §120 of any
	United States application(s), or §365(c) of any PCT International application(s)
	designating the United States of America listed below and, insofar as the subject matter
	of each of the claims of this application is not disclosed in the prior United States or PCT
	International application in the manner provided by the first paragraph of Title 35, United
	States Code, §112, I acknowledge the duty to disclose material information as defined in
	Title 37, Code of Federal Regulations, §1.56 which became available between the filing
	date of the prior application and the national or PCT International filing date of this
	application:



PCT International Applications designating the United States:

PCT Appln No.	US Serial No.	PCT Filing Date	Status

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

all of MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO PC, One Financial Center, Boston, Massachusetts 02111, as Applicant's attorneys with full power of substitution and revocation to take any and all action necessary with regard to the above-identified patent.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or patent issued thereon.

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